Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
T	OTAL CLAIMS				3:		1	RATE	FEE	7	RATE	FEE	
FC	DR		NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00	
TO	TAL CHARGE	ABLE CLAIMS	. mir	nus 20=	*		1	X\$ 9=		OR.	X\$18=		
IN	DEPENDENT C	LAIMS	m	inus 3 =	*		1	X42=		OR	X84=		
MU	JLTIPLE DEPEN	NDENT CLAIM P	RESENT				1	.110	ļ	1			
* If	the difference	in column 1 is	less than zero, enter "0" in colur			column 2	<b>'</b> [	+140=	ļ	OR	+280=	<del>, , , , , , , , , , , , , , , , , , , </del>	
	. с		TOTAL		OR	TOTAL OTHER	THAN						
_		(Column 1)	1	(Colur	Column 2) (Column 3)			SMALL	ENTITY	OR	SMALL		
AMENDMENTA		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š	Total	+ 16	Minus	** 2	<u> </u>	=	] [	X\$ 9=		OR	X\$18=	•	
AME	Independent	TATION OF MI	Minus		<u>3</u>	=	<b> </b> [	X42=		OR	X84=		
	THOTTALOL	INTATION OF IM	JETTPLE DE	PENDENT	CLAIIVI	ليا	, L	+140=		OR	+280=		
							L	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)					ADDN. I EL		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	. 18	Minus	** 02	20	=		X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF MU	Minus	***	<u>3</u>	=	$\prod$	X42=	/	OR	X84=		
	rino i Prese	NTATION OF MIC	LIPLE DEF	ENDENT	CLAIM		<b>」</b>	+140=			+280=		
							L	TOTAL			TOTAL	$\overline{}$	
		(Column 1)	_	(Colun	nn 2)	(Column 3)		DDIT. FEE <b>L</b>		,	ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	]	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	01.411.4	=	1	X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +											+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  OR +280=  OR ADDIT. FEE  TOTAL ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Effective December 29, 1999									02/539508					
			FILED - olumn 1)	SMALL ENTITY TYPE			OTHER THAN							
FC	R		NUMBE	R FILED	1	NUMBER EXTRA		RAT	É	FEE		RATE	FEE	
BASIC FEE							1	á	345.00	OR	4. 15. 15. 16. 16. 16. 16. 16. 16. 16. 16. 16. 16	690.00		
то	TAL CLAIMS			6 minus 2	20= •		X\$ 9	9=		OR	X\$18=			
IND	EPENDENT CL	AIMS	نر	2 minus	3 = *		X39	)=		OR	X78=			
MULTIPLE DEPENDENT CLAIM PRESENT							+130	)=		OR	+260=			
* If the difference in column 1 is less than zero, enter "0" in column 2									AL		OR	TOTAL	1090	
CLAIMS AS AMENDED - PART II									OTHER THE SMALL ENTITY OR SMALL EN					
	imen en		umn 1) AIMS			olumn 2) IGHEST	(Column 3)	SWIA				JIMALL		
ENT A		REMAINING AFTER AMENDMENT		•	N PRE	UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•		Minus	••		=	X\$ 9	9=		OR	X\$18=		
IME	Independent	•		Minus	***		=	X39	)=		OR	X78=		
F.	FIRST PRESE	NTATIO	ON OF MU	JLTIPLE DEI	PEND	ENT CLAIM		+130	 D=		OR	+260=		
											ام	TOTAL		
								ADDIT.	FEE		JON .	ADDIT. FEE	L	
	Internal of the second		lumn 1)	<del></del>		olumn 2) IIGHEST	(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		•	PRI	NUMBER EVIOUSLY PAID FOR	PRESENT	RAT	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	**		=	X\$ :	9=		OR	X\$18=		
	independent			1,,,,,,		** =		X39	<b>)</b> =		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+260=		
				•				TO ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
		(Co	luma 1)		(C	olumn 2)	(Column 3)							
ENT C		REN A	LAIMS MAINING IFTER NDMENT		PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	RA	ΓĒ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*		Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	٠		Minus	***		=	X39	 }=		1	X78=	<del>                                     </del>	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-\(\)			OR	<b></b>	<del>                                     </del>	
	If the cate is and		loss than t	no opini in aci	ump ?	write "O" in	olumn 3	+13			OR	+260=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														